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Exemptions-	Trusts-	/PO	IPO and EX	V. (more than \$10 If yes, comp	if yes, comp	IV. reportable ass	If yes, comp	III. more than \$20	If yes, comp	Did any individual. paying you for	If yes, comp	Did you or you l. \$200 or more	PRELIMINA	Туре	Report	Status	Filer				CALENDAR
	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse,	Did you purchase any shares that were allocated as a part of an initial Public Offering?	CLUSION OF SPOUSE, DEPENDEN	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	ff yes, complete and attach Schedule IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	If yes, complete and attach Schedule III.	Did you, your spouse, or a dependent child receive "uneamed" income of more than \$200 in the reporting period or hold any reportable asset worth	If yes, complete and attach Schedule II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	If yes, complete and attach Schedule I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	Annual (May 15) Amendment		House of Representative District: 02	Member of the U.S. State: NV	(Full Name)	Mark Eugene Amodei		CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
assets, "unearned" inc n? Do not answer 'ye	roved by the Committe t details of such a trus	ted as a part of an initia	T, OR TRUST IN	Yes 🕢 No 🗌		Yes No		Y8% ≤ No □		Yes U No		Yes 🗆 No 🗸	H OF THESE Q	☐ Termination							TEMENT
Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ee on Ethics and certain other "excepted trusts" need not be t benefiting you, your spouse, or dependent child?	al Public Offering?	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	If yes, complete and attach Schedule IX.	Did you have any reportable agreement or arrangement with an outside IX. entity?	If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	If yes, complete and attach Schedule VII.	Did you, your spouse, or a dependent child receive any reportable travel VII. or relimbursements for travel in the reporting period (worth more than	If yes, complete and attach Schedule VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise	UESTIONS	tion	Termination Date:	Employee	Officer Or Employing Office:	(Daytime Telephone) U.S. H		2813	For use by Members, officers, and employees:
hild Yes No V	Yes 🗌 No 🗸	Yes ☐ No 🗸	SE QUESTIONS	ed and the appropriate		an outskie Yes ☐ No 🗸		ffiling in the Yes ☐ No ☑		be travel ore than Yes ☐ No ☑		totherwise Yes 🔲 No 🗸		late.	more than 30 days	be assessed against	A \$200 penalty shall	(Office Use Only)		2013 144 15 23 4: 17	

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or income Source identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.	Year-End Value of Asset Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting year and is included only because it generated Income, the value should be "None." * This column is for assets held solely by your spouse or dependent child.	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" If the asset generated no income during the reporting period.	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated. * This column is for income generated by assets held solely by your spouse or dependent child.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
Bank of America	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Greater Nevada Credit Union	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
National Financial Services IRA - CNL REIT	\$50,001 - \$100,000	None/TAX- DEFERRED	NONE	
National Financial Services IRA - Wells REIT II	\$50,001 - \$100,000	None/TAX- DEFERRED	NONE	

SCHEDULE V - LIABILITIES

Name Mark Eugene Amodei

Page 3 of 3

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: for liabilities held solely by your spouse or dependent child. liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. *This column is Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances;

Everhome	SP, DC, JT
Everhome Mortgage Company	Creditor
December, 2008	Date Liability Incurred
Mortgage on 805 W Sunset, Carson City, NV 89703	Type of Liability
\$100,001 - \$250,000	Amount of Liability